

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1.000		04-05-01
O.I.P.E. CLASSIFIER		10	4-30-01
FORMALITY REVIEW	H.S.	866	05-10-01
RESPONSE FORMALITY REVIEW	TAP	110	8-22-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	3/19/03
2	11/04/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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